

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Swain *et al.* Confirmation No.: 9609

Application No.: 10/647,071 Art Unit: 1639

Filed: August 22, 2003 Examiner: Steele, Amber D.

For: HAPten-CARRIER Attorney Docket No.: 11662-003-999
CONJUGATES FOR USE IN CAM No.: 526624-999003
DRUG-ABUSE THERAPY AND METHODS FOR PREPARATION OF SAME

AMENDMENT FEE TRANSMITTAL SHEET

Electronic Filing
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The fee required to be filed with the accompanying amendment of even date herewith concerning the above-identified application has been estimated to be \$0.00.

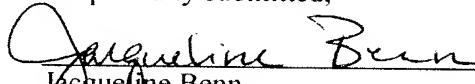
The claim amendment fee has been estimated as shown below:

| (Col. 1) | | (Col. 2) | (Col. 3) | <input type="checkbox"/> SMALL ENTITY | | <input checked="" type="checkbox"/> OTHER THAN A SMALL ENTITY | | |
|--|-------|-----------------------------------|------------------|---------------------------------------|-----------|---|-------|-----------|
| CLAIMS REMAINING AFTER AMENDMENT | MINUS | HIGHEST NO. PREVIOUSLY PAID | PRESENT EXTRA | RATE | ADDT. FEE | OR | RATE | ADDT. FEE |
| TOTAL | 12 | 32 | 0 | x 26 | \$ | | x 52 | \$ 0.00 |
| INDEP. | 1 | MINUS | 3 | x 110 | \$ | | x 220 | \$ 0.00 |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM | | | | | \$ | | \$ | 0.00 |
| | | | | TOTAL | \$ | OR | TOTAL | \$ 0.00 |

Please charge the required fee to Jones Day Deposit Account No. 50-3013. A copy of this sheet is enclosed.

Respectfully submitted,

Date: January 26, 2009


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